

### STATE AND CONSUMER SERVICES AGENCY . ARNOLD SCHWARZENEGGER, GOVERNOR

### **Dental Board of California**

2005 Evergreen Street, Suite 1550, Sacramento, CA 95815 P (916) 263-2300 F (916) 263-2140 www.dbc.ca.gov



# **Application for Continuing Education Provider**Business & Professions Code § 1645, Title 16 CCR §§ 1016-1017

Non-Refundable Fee: \$250 (Must accompany application) Applicant must certify by initialing each box below that the provider organization has met and will continue to meet all of the following requirements.

	For Office use only			
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Approved	Denied			
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1.	Name of provider organization		2.	Telephon	e Number	
3.	Street address of provider organization	City		State	Zip	
4.	Mailing address of Provider Organization	City		State	Zip	
5.	Name of contact person of provider organization		6.	Telephon	e Number	
8.	Provider organization is a/an: Individual Partnership Corporation Government Agency	De He	ntal Soc ntal Spe alth Fac	ecialty Group		
Corporate Number  10. Describe the goals/objectives of the CE program, and include any outlines, summaries, or brochures pertaining to the course (s). Pursuant to proposed regulations, mandatory CE courses must be						
	approved in advance.					

## **Courses of Study**

11.	Each course of study will be conducted on the same educational standards of scholarship and teaching as that required of a true university discipline, and be supported by those facilities and educational resources necessary, and comply with this requirement.	Initial:
12.	Each course of study offered will clearly state educational objectives that can be realistically accomplished within the framework of that course.	Initial:
13.	Lecture Seminar Clinical Audiovisual Simulation Interactive live-time (computers, telephone or video conferencing, or other electr Non-interactive home study (computers, tape recorded and correspondence cou	onic mediums)
14.	Other (describe)  Participants completing courses of study for credit will be asked to provide a written evaluation of the quality of the course.	Initial:
15.	All courses offered will be a means of an orderly learning experience in an area of study pertaining to dental and medical health, preventive dental services, diagnosis and treatment planning, clinical procedures, basic health sciences, dental practice administration, or the Dental Practice Act and other laws specifically related to dental practice which is designed to directly enhance the licensee's knowledge, skill or competence in the provision of service to patients or the community.	Initial:
16.	Courses of study offered for continuing education credit will be available to all dental and dental auxiliary licensees.	Initial:
<b>Inst</b> 17.	ructors  Each instructor will have education and experience of at least two years in the subject being taught.	Initial:
<b>Rec</b> 18.	The provider will furnish written certification to each licensee that the licensee has met the attendance requirement of the course and contain the licensee's name and license or permit number, the provider's name, the 11 digit course registration number in the upper left hand corner of the certificate, date or dates attended, number of units earned, and a place for the licensee to sign and date to verify attendance.	Initial:
19.	The statement, "completion of this course does not constitute authorization for the attendee to perform any services that he or she is not legally authorized to perform based on his or her license or permit type," will be contained on the certification of course completion.	
	•	Initial:

20. The certification of the course completion will be signed by the provider or providing entity and contain the statement, "All of the information contained on this certificate is truthful and accurate."				
	Initial:			
21. Describe how "Certificates of Completion" will be distributed to licensees.				
22. The provider is aware of the record keeping requirements specified in Section 1016(e) in the event the Board conducts an audit of those courses offered for continuing education credit.	Initial:			
23. The provider is aware of biennial report due at the time of provider renewal which includes a list of all courses offered for credit, and their course names and qualifications of each instructor, and a summary of the content of each course of study.	Initial:			
24. The provider is aware that duplicate certificates may only be issued to a person whose name is on the original roster of course attendees and must state, "Duplicate."	Initial:			
Acknowledgement				
25. The provider has reviewed Business & Professions Code § 1645 and California Code of Regulations, Sections 1016 and 1017.	Initial:			
26. The provider agrees to abide by the requirements set forth in Business and Professions Code, Section 1645 and California Code of Regulations, Sections 1016 and 1017. The provider acknowledges that failure to do so may result in loss of provider status.	Initial:			
Certification I certify under the penalty of perjury under the laws of the State of California that the statements made in the application are true and correct, and that all courses offered for continuing education credit will meet the requirements set forth by the Board.				
Signature of provider administrator Date				
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#### **INFORMATION COLLECTION AND ACCESS**

The information requested herein is mandatory and is maintained by Dental Board of California, 2005 Evergreen Street, Suite 1550, Sacramento, CA 95815, Executive Officer, 916-263-2300, in accordance with Business & Professions Code, §1600 et seq. The information requested will be used to determine eligibility. Failure to provide all or any part of the requested information will result in the rejection of the application as incomplete. Each individual has the right to review the personal information maintained by the agency unless the records are exempt from disclosure. Applicants are advised that the names(s) and address(es) submitted may, under limited circumstances, be made public.